NEEDS ASSESSMENT SURVEY FINDINGS FORM

Planning Area: North/Northeast Texas
BDTP: F/MS Men

HMAZ/LMAZ Area: Rural North
SUBPOPULATION: Hispanic (1,12)

	# of surveys completed: 80	
	Information from needs assessment surveys	Assessment
Risk Behaviors (13,15,16, 22,24,25, 26,27,28,29 30,33)	 40% reported more than one sex partner in the past year; 20% reported more than 3 partners in the past year. 4% reported that at least one of their sex partners in the past year now had HIV. 2% reported that at least one of their sex partners in the past year had an STD. 8% say they had been treated for an STD in the past year. Only 16% reported engaging in anal sex. Of those engaging in anal sex, 32% reported never using a condom and 4% reported almost always using a condom for anal sex. Of those engaging in oral sex, 68% never use a condom for oral sex. Of those engaging in vaginal sex, 53% never use a condom for vaginal sex. The top five locations where this Hispanic F/MS men engaged in anal sex are (in order): home [13%]¹, someone else's home [6%], cars/vehicles [4%], bars/clubs [3%], hotels/motels [3%]. The top five things Hispanic F/MS men said they do to keep from getting HIV are (in order): have only one sex partner [45%]¹, don't inject drugs [44%], don't abuse alcohol or drugs [31%], don't share IDU equipment [29%], sometimes use condoms [21%]. The top five things Hispanic F/MS men said they do to keep from getting STDs are (in order): have only one sex partner [43%]¹, don't inject drugs [43%], don't abuse alcohol or drugs [33%], don't share IDU equipment [28%], sometimes use condoms [19%]. 	 A fairly high proportion of the population reported they have engaged in sex with multiple partners. There is a high prevalence of HIV in the population based on the morbidity profile for this population. Reported condom use, particularly with vaginal sex is much less than observed in some of the other populations. While public locations were indicated as places where Hispanic F/MS men engaged in sex, similar proportions indicated these activities occur in more private locations. This should be taken into account when trying to reach this population.

Numbers noted in parentheses () indicate questions number on the needs assessment survey which correspond to that category.

^{*}Denotes the factors that influence behaviors (FIBs). See Tab 8 TDH Insert, Selecting and Prioritizing Interventions for a more detailed description.

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*Knowledge (9,11)	Among Hispanic F/MS men: 88% indicated that anal sex without a condom might increase a person's chance of getting HIV, 74% for getting STDs other than HIV. 64% and 86% indicated that oral and vaginal sex without a condom, respectively, might increase a person's chance of getting HIV; 61% and 68% indicated that oral and vaginal sex without a condom, respectively, may increase a person's chance of getting STDs other than HIV. 86% indicated that sex-trade work might increase a person's chance of getting HIV, 70% for getting STDs other than HIV. 93% indicated that unprotected sex under the influence might increase a person's chance of getting STDs other than HIV. 93% indicated sex with more than one partner might increase a person's chance of getting HIV, 73% for getting STDs other than HIV. 93% indicated that injecting drugs and sharing works might increase a person's chance of getting HIV, 73% for getting STDs other than HIV. 93% indicated that injecting drugs and sharing works might increase a person's chance of getting HIV, 60% for getting STDs other than HIV. 90% indicated that having sex with men might increase a person's chance of getting HIV, 69% for getting STDs other than HIV. 70% indicated that engaging in sex with a woman who has engaged in risky behaviors may increase a person's chance of getting HIV, 71% for getting STDs other than HIV. 71% indicated that blood transfusions might increase a person's chance of getting HIV, 38% for getting STDs other than HIV. 78% indicated that needle sticks might increase a person's chance of getting HIV, 46% for getting STDs other than HIV.	Approximately four-fifths of the population showed good knowledge of HIV transmission routes. This community shows good knowledge of HIV and STD transmission routes, given these risks.

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*Attitudes & beliefs (10,32,34)	 Overall, Hispanic F/MS men in this population indicated they strongly agreed that a person should tell their partner if they have HIV or an STD whether they use a condom or not. The top four reasons Hispanic F/MS men indicated they had sex without a condom are (in order): trust partner [38%]¹, don't like condoms [28%], drunk or high [13%], married [11%]. 89% indicated they were not likely to get HIV, and 85% indicated they were not likely to get an STD. 	 Most respondents in the survey indicated a strong motivation to discuss HIV and STD risks if they are infected. Primary barriers to condom use were trust in partner and dislike of condoms. Considering the high morbidity rates in this community, the personal perception of risk is low.
*Current communication skills	 47% of the Hispanic F/MS men who responded indicated they have talked about getting HIV with at least some of their partners. 45% of the Hispanic F/MS men who responded indicated they have talked about getting an STD other than HIV with at least some of their partners. 	While most of the Hispanic F/MS men indicated they should discuss with their partners if they had an STD or HIV, less than half of this population has discussed the possibility of this risk with their partners.
*Social/peer support (17)	When asked who they would tell if they had contracted HIV or an STD other than HIV, the following proportions of Hispanic F/MS men indicated they would tell: • Their family; 36% for HIV, 5% for an STD. • Their current partner(s); 25% for HIV, 3% for an STD. • Their past partner(s); 27% for HIV, 2% for an STD. • Their friends; 36% for HIV, 9% for an STD.	A large majority of the population reported they would be uncomfortable telling family, friends and partners if they contracted HIV. They were even less likely to talk about an STD infection.
Testing history/need for testing (18-23)	 50% of survey respondents indicated they have tested for HIV in the past year. Of those who were tested, they tested an average of 1.2 times a year. The top two reasons Hispanic F/MS men indicated they tested were (in order): part of routine health care [23%]¹, sex without a condom 19%]. The top two reasons Hispanic F/MS men indicated they have not tested are (in order): they don't think they are at risk of getting HIV [13%]¹, not sexually active [9%]. 4% of the respondents indicated they have tested positive for HIV. 	 Testing proportions in this population are good both in terms of the proportion tested and the frequency of test, especially with the majority of the population having one partner in that time period. A fair proportion of respondents indicated a preventive behavior [23%], part of routine care. Most other reasons for testing were due to potential failures of prevention activities.

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	 30% of the respondents tested for an STD other than HIV in the past year. Of those testing, they tested an average of 1.5 times a year. 22% of the Hispanic F/MS men who have tested for an STD in the past year indicated they have tested positive for an STD. 8% of respondents indicated they have been treated at least once for an STD in the past year. The top two reasons cited for not testing for an STD were (in order): not at risk [28%]¹, not sexually active [15%]. 18% of respondents indicated they have tested for Hepatitis A in the past year, 24% for Hepatitis C, 16% for Hepatitis B, and 29% tested for Tuberculosis. 28% of respondents who didn't test indicated they did not test because they did not believe they were at risk for those diseases, 23% didn't test because they had no symptoms of those diseases. 	 The most common barrier to testing indicated by these respondents was that they didn't think they were at risk for these diseases. A fair proportion of the respondents indicated they felt the need to be tested for an STD in the past year. The frequency of testing is similar to the majority of the population having one partner. Less than a quarter to almost a third of this sub-population indicate they have been tested for other diseases in the past year. This supports the critical nature of referrals to appropriate providers.
Prevention services currently accessed (19,21) Note: For testing, community-based organizations and corrections were not provided as a response option.	 The top four locations Hispanic F/MS men go to for an HIV test are (in order): doctor's office [10%]¹, public STD clinic [9%], other public clinic [8%], hospital [8%]. The top four locations Hispanic F/MS men go for an STD examination are (in order): hospital [8%]¹, doctor's office [4%], public STD clinic [4%], other public clinic [4%]. 14% of respondents indicated barriers in their community to seeking prevention services. These include (in order): town or community is too small [6%]¹, family or friends may find out [5%], lack of HIV or STD programs in the community [4%], don't know where to go for programs or services [4%], inconvenient hours of operation [3%]. The top four locations where Hispanic F/MS men have gotten HIV information are (in order): treatment centers [11%]¹, public health clinics [10%], library [10%], local HIV/AIDS organizations [9%]. The top five locations where Hispanic F/MS men have gotten STD information are (in order): treatment centers [10%]¹, public health clinics 	 The primary source for HIV testing and STD diagnosis and treatment are through private doctors, public clinics, and hospitals. Size of town or community, confidentiality, lack of needed programs or services, and inconvenient hours of operation were cited as barriers to access services. In contrast to testing and diagnosis services, prevention information and helpful information was obtained from community-based organizations, public health clinics, and the library.

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	 [10%], library [9%], school [8%], local HIV/AIDS organizations [8%]. The top five locations where Hispanic F/MS men have gotten information on HIV that has helped them are (in order): treatment centers [15%]¹, local HIV/AIDS organizations [14%], school [13%], public health clinics [13%], health care providers [11%]. The top five locations where Hispanic F/MS men have gotten information on STDs that has helped them are (in order): treatment centers [14%]¹, local HIV/AIDS organizations [14%], school [13%], public health clinics [11%], health care providers [11]%. 	
Prevention needs (35-39)	 For those indicating they wanted to know more to help protect them from acquiring HIV, the following activities were requested (in order): basic information on HIV/STDs [33%]¹, how to have safe sex [28%], how to talk to partner about using condoms [14%], drug abuse counseling and treatment [13%], how to use condoms [9%],. Primary locations where Hispanic F/MS men indicated they would get information on HIV in the future are (in order): local HIV/AIDS organizations [51%]¹, health care providers [51%], public health clinics [48%], other health clinics [45%], treatment centers [43%], community counseling and testing centers [41%],. Primary locations where Hispanic F/MS men indicated they would get information on STDs in the future are (in order): health care providers [46%]¹, local HIV/AIDS organizations [44%], public health clinics [41%], other health clinics [40%], treatment centers [39%]. Primary locations where Hispanic F/MS men indicated they would NEVER get information on HIV in the future are (in order): bars [49%]¹, work [40%], bath houses [40%], church [34%], shelters [30%]. Primary locations where Hispanic F/MS men indicated they would NEVER get information on STDs in the future are (in order): bars [48%]¹, work [40%], bath houses [40%], church [34%], shelters [30%], bath houses [39%], church [33%], shelters 	 Basic information on HIV/STDs lead the activities wanted by Hispanic F/MS men, followed by interventions on how to have safe sex. The primary locations where Hispanic F/MS men indicated they would go to get HIV and STD information are community-based organizations, health care providers, and public and private clinics. The locations where Hispanic F/MS men would never seek HIV or STD prevention messages are bars, work, bathhouses, church, and shelters.

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	[28%].	
Specific Information about HIV ⁺ from HIV ⁺ risk profiles	 Statewide for all HIV positive Hispanic F/MS² men: 52% indicated they never used a condom for anal sex, 45% never used a condom for vaginal sex, and 79% never used a condom for oral sex. Nearly 10% indicated an STD diagnosis in the past year. Over 40% indicated more than 1 sex partner in the past year. Over 1% indicated some sex trade work in the past year. 56% indicated substance use with sex in the past year. Nearly 50% indicated their partners were at risk, and a third indicated their partners had multiple partners. The top drugs used during sex were: alcohol [51%]¹, marijuana [16%] and cocaine [12%]. In Rural North, all HIV positive F/MS men indicated²: 20% indicated an STD diagnosis in the past year. 20% indicated they had more than 1 partner in the past year. None indicated sex trade in the past year. Two- thirds indicated substance use with sex in the past year. Nearly a quarter indicated their partner was at risk, and over a quarter indicated their partners had multiple partners. The top drugs used during sex were: alcohol [47%]¹, marijuana [27%], and cocaine [20%]. 	 The proportion of Hispanic F/MS men positives reporting never using a condom for anal sex is nearly 1.5 times that reported for Hispanic F/MS men by the needs assessment. Condom use for vaginal and oral sex is similar between positives and negative Hispanic F/MS men. The proportion of HIV positives with a recent STD diagnosis is significantly high, particularly considering the high proportion (40%) with multiple sex partners. Between a quarter and half of HIV positives indicated their sex partner was at risk. The drugs of choice for HIV positives are alcohol, marijuana, and cocaine.
Other		

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